Amendments to the Specification:

(Please note that all paragraph numbers mentioned below are for the paragraphs numbered in accordance with the published version of this application (Pub. No.: U.S. 2005/0075616 A1.) Thank you.

Please replace paragraph [0038] with the following amended paragraph:

[0038] FIG. 14 depicts a formed fluid conveyance tube that is attachable to latent fluid conveyance tubes depicted in FIG. [[~~12~~]] 13 A and FIG [[~~12~~]] 13 B.

Please replace paragraph [0044] with the following amended paragraph:

[0044] FIG. 2 depicts in cutaway outline the internal surface of body-side wall 20 of ostomy bag 21 which has a rounded-corner rectangular-like perimeter and upper extremity 21u, with sealed perimeter edges (seals 22, 22b and versatile tube 25 lower perimeter seal 22c all represented by hatched lines) and unsealed perimeter edge (port 26). The full perimeter of FIG. 2 depicts the frontal outline view of ostomy bag 21. Ostomy bag 21 depicts a closed ostomy bag, thus having stomal aperture 29 but having neither a waste discharge outlet (corresponding to port 14 of FIG. 1 nor a narrow channel (corresponding to waste discharge channel 13 of FIG. 1). As previously indicated both closed and drainable ostomy bags have been made available in a number of different shapes. For example, both drainable and closed types of bags can be made available with arched profile upper extremities (similar to the upper extremity of main chamber 17 of ostomy bag 11 of FIG. 1) or generally straight profile upper extremities as depicted in the upper extremity of main chamber 27 of FIG. 2 (both as viewed from the front). Versatile tube 25 of ostomy bag 21 comprises latent chamber 25c, which is formed by a portion of seal 22 (on its upper edge and its end

proximal channel 23), seal 22c and multipurpose port 26. Space 22a is an exaggerated depiction to show that seal 22c is not connected to seal 22b except at the ends of seals 22b and 22c proximate channel 23. Channel 23 is formed between a portion of seal 22 and the joined ends of seals 22b and 22c distal from port 26. Channel 23 serves as a fluid communication connection of chamber 25c of tube 25 with the upper extremity of chamber 27. The length of versatile tube 25 as compared, for example, to versatile tube 15 of FIG. 1 provides advantages for the ostomist who for example wants to use the tube for housing elongated filter material. Further consideration of such alternatives is discussed below. Ostomy bag 21 could be used for example, in many of the ways indicated: (a) for versatile tube 15 of bag 11 of FIG. 1; and (b) in the discussion of the combinations depicted in FIG. 6B below. The flat top profile upper extremity could be used to advantage with [[~~in~~]] a format that would use other lower bag designs, e.g., drainable bags.[[.]] The inclusion of the versatile tube in a flat top bag offers significant added options for the ostomist.

Please replace paragraph [0055] with the following amended paragraph:

[0055] FIG. 12 A depicts in portal side partial cutaway view of adhesive side 116 of filter 102 having portals 110 and 111. Filter 102 has an elongated rectangular filter pad 109 that is sealed between rear wall 113 which is visible through ports 110 and 111 and front wall 114 having an exterior surface having a peripheral area 116 covered by adhesive and a central area 115 free from adhesive. Flatus gas would be deodorized by passing through filter 102, entering at port 111 and exiting at port 110. Both port 110 and 111 are depicted as having reinforced edges 107 and 108 respectively, to better assure port definition integrity. Filter-pad end spot-seals 1071 and 1081 which seal rear wall 113 to front wall 114 assure filter 109 does not move longitudinally and also helps keep filter 102 substantially flat during use. (See reference to seals 98 and 97 in

reference to FIG. 11 A above). Edge seals 103 and 104 are close to filter pad 109 for its full length and therefore provide ample space for gas to pass through filter 102 from port 111 to port 110 in substantial contact with filter pad 109, but very little, if any, space for gas to pass through without having such contact with filter pad 109. End seals 105 and 106 together with side seals 103 and 104 of filter 102 assure that ports 111 and 110 are the only entry and exit routes for gasses. FIG. 12 B depicts (with sealed edges 118 and 119 exaggerated) latent filter tube 120 having front wall 129 and rear wall 117 (visible through ports 121, 122, and 123, which ports also optionally have reinforced circumferences to minimize damages to the ports during filter exchange as explained further below). Interval seals 124, 125 and 126, each sealed between walls 117 and 129 and extending from edge seal 118 to edge seal 119, with interval seals 125 and 126 located between ports 122 and 121 thereby preventing gas flow therebetween through tube 120. In use, flatus gas enters filter tube 120 at E in the direction (indicated by the arrow at the right side of FIG. 12 B). Interval seal 126 helps guide the gas out port 121 which in proper use would be mated with an intake port of a filter. FIG. 12 C depicts latent filter tube 120 of FIG. 12 B in mating relationship with filter 102 of FIG. 12 A. Filter 102 of FIG 12 A mates when adhesive area 116 of filter 102 is pressed in mating contact with the exterior surface of wall 129 of filter latent tube 120 of FIG 12 B so that ports 110 and 111 of filter 102 mate with filter latent tube 120's ports 122 and 121, respectively; and edges 103 and 104 of filter 102 align with latent tube 120's edges 119 and 118, respectively. Accordingly, as depicted in greatly magnified, side view cutaway in FIG. 12 C, when connected from the "E" direction to an ostomy bag (not shown) by one of the connectors depicted and discussed above, latent tube 120 receives flatus gas in receiving chamber 128. The gas would be diverted out of chamber 128 through port 121 of tube 120 and through port 111 into filter 102 where it would begin its path through and beside (in contact with) filter pad 109 of filter 102 in the direction of outlet port 110. Gas reaching the

distal end of filter pad 109 would then be forced out of filter 102 through port 110 and through port 122 back into filter tube 120: (a) if additional filters are to be used, for redirection into the next filter (as depicted); or (b) if no other filter is to be used, for release into the environment. Accordingly, filter tube 120 provides the ostomist the further flexibility, again, of using one or a series of filters. Moreover, when one filter becomes exhausted it can be pealed off tube 120 using grip tab 112 of filter [[112]] 102 for replacement with a new filter, providing a further flexibility advantage.[[.]]